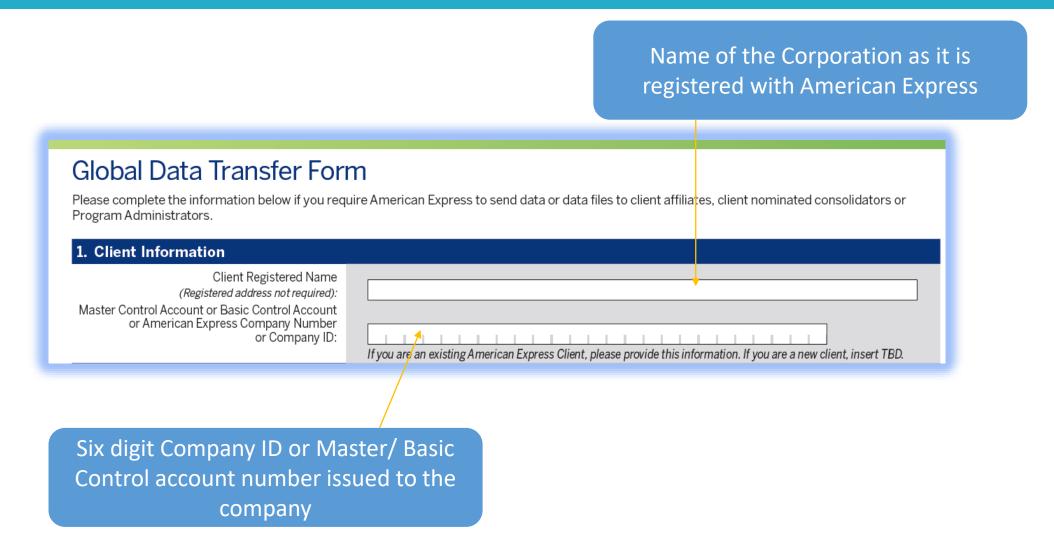
Global Data Transfer Form

Instructions for completing the GDTF form

Section 1 – Client Information



Section 2 – Data Recipients (Client Affiliates)

2. Data Recipients			
	If you would like to provide additional information, please provide details on Company letter headed paper, dated and signed, and submit with this form. Please include your Client account number on the attached document.		
	Client Affiliates		
	Please provide details of the client affiliates that you wish American Express to send data or data files on your behalf. For definition of affiliate please see footnote at end of page 3*.		
Client Affiliate Name:			
Client Affiliate Address:			
			<i>'Client Affiliates'</i> field
Postal Code / Zip Code:	Country:		is Optional - Complete
Client Affiliate Name:			
Client Affiliate Address:			this section if data will
			he sent to a subsidiary
Postal Code / Zip Code:	Country:		or other legal entity.
Client Affiliate Name:			
Client Affiliate Address:			
Postal Code / Zip Code:	Country:		



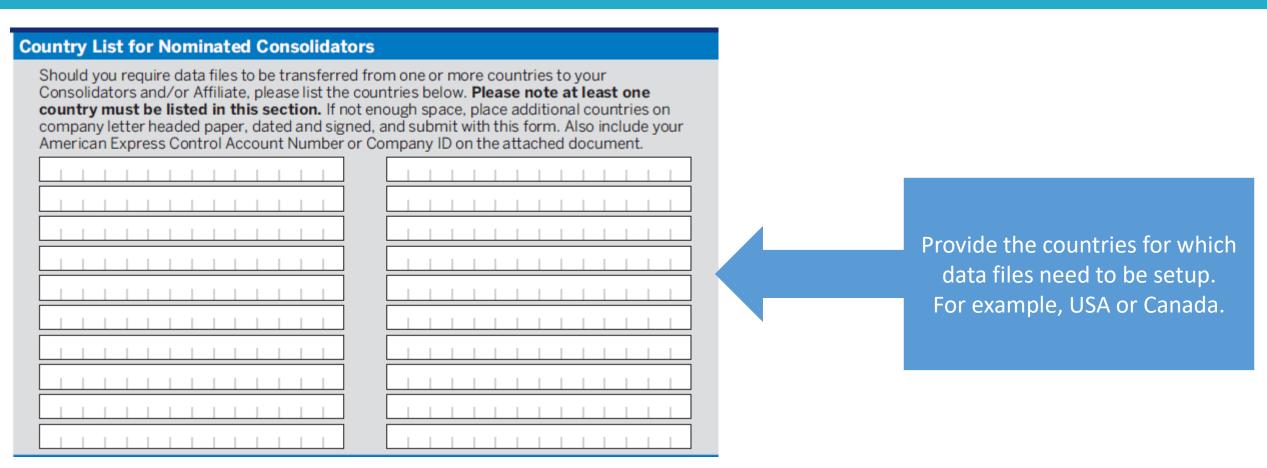
^{*} Please note: If there are more affiliates than the space allocated, please attach a list of additional affiliates on your Company Letterhead and have it signed by the authorized signatory and submitted with the form.

Section 2 – Data Recipients (Nominated Consolidator)

	Nominated Consolidator
	Please provide details of the nominated consolidator(s) that you wish American Express to send data files on your behalf. If there is not enough space, place additional Consolidators on company letter headed paper, dated and signed, and submit with this form. Also include your American Express Control Account Number or Company ID on the attached document.
Consolidator Name:	
Consolidator Address:	
Postal Code / Zip Code:	Country:
Consolidator Name:	
Consolidator Address:	
Postal Code / Zip Code:	Country:

'Nominated Consolidator' field is Optional. It applied when a 3rd party is to received the data from AmEx on behalf of the client.

Section 2 – Data Recipients (Country List)



* Please note: If the list of counties is longer than the space allocated on the form, please attach a list of counties on your **Company Letterhead** and have it signed and dated by the authorized signatory and submitted with the form. It is ok to add all countries in which you may send data even if not setting all up on data file initially.



Section 2 – Data Recipients (European Clients only)

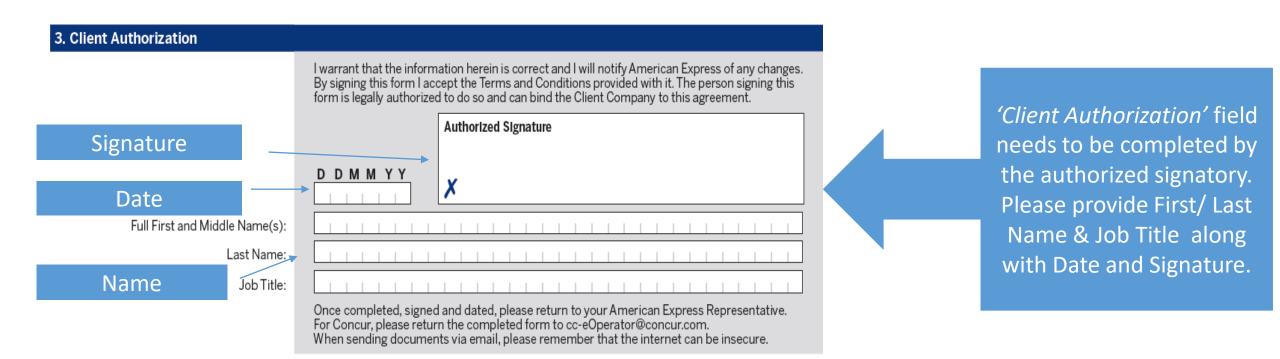
	Program Administrator
	For European Clients only: Please note this section requires completion only where the Program Administrator is employed by a Client Affiliate or Program Administrator servicing center outside the European Economic Area (EEA) or whose correspondence address is outside the EEA. Please provide details of the Program Administrator's employee that you wish American Express to send data or data files on your behalf. If there is not enough space, place additional Program Administrator's details on company letter headed paper, dated and signed, and submit with this form. Also include your American Express Control Account Number or Company ID on the attached document.
Name of Company that Program Administrator is employed by:	
Address of Company that Program Administrator is employed by:	
Postal Code/Zip Code:	Country:
Name of Company that Program Administrator is employed by:	
Address of Company that Program Administrator is employed by:	
Postal Code/Zip Code:	Country:

'Programme Administrator' section is Optional – For European **Clients Only**

*Please complete this section if a company employee will be accessing the data from the same company but from a different legal entity.



Section 3 – Client Authorization



- *Please note that all the pages of GDTF form including terms & conditions should be sent for data file implementation requests.
- * Ensure the entire document is in readable format without any errors. In the case of any errors, please complete a new form.